



Notice: This application is authorized by s. 283.37, Wis. Stat., and chs. NR 151 and 216, Wis. Adm. Code. Personally identifiable information on this form may be used for other program purposes and may be made available to requestors under Wisconsin's Public Records laws and be posted on the Department's internet site.

Instructions: Complete the following for all permit applications. If additional space is needed to respond to a question, attach additional pages. Provide descriptions below that explain the program activities that you expect to develop and implement to comply with the Municipal Separate Storm Sewer System (MS4) general permit (<http://dnr.wi.gov/org/water/wm/nps/stormwater/muni.htm>). Section 3 of the MS4 general permit contains the compliance schedules that direct when the individual program activities need to be developed and submitted to the Department for review. The detailed programs that are developed and submitted to the Department for review may deviate from the program activities described below if necessary. The descriptions provided below are necessary for the Department to verify that the municipality's program activities comply with the permit.

Section I: Applicant Information

Name of Municipality

Town of Oshkosh

Mailing Address

1065 Cozy Lane

City

Oshkosh

State

Wisc.

Postal Code

54901

County(s) in which Applicant is located

Winnebago

Type of Municipality: (check one)

☐ County ☐ City ☐ Village ☒ Town ☐ Other (specify)

Section II: Local Contact Information (check one):

Name of Municipal Contact Person

Jim Erdman

Title

Town Supervisor

Mailing Address

1065 Cozy Lane

City

Oshkosh

State

WI

Postal Code

54901

E-mail address

townofoshkosh@new.m.com

Telephone Number (include area code)

920-233-3618

Fax Number (include area code)

920-231-3435

Section III: Water Quality Concerns

Yes

No

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Does any part of the MS4 discharge to an outstanding resource water (ORW) or exceptional resource water (ERW) listed under s. NR 102.10 or 102.11, Wis. Adm. Code? (An unofficial list of ORWs and ERWs may be found on the Department's Internet site at: <http://dnr.wi.gov/org/water/wm/wqs/>)

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Does any part of the MS4 discharge to an impaired waterbody listed in accordance with section 303(d)(1) of the federal Clean Water Act, 33 USC § 1313(d)(1)(C)? (A list of Wisconsin impaired waterbodies may be found on the Department's Internet site at: <http://dnr.wi.gov/org/water/wm/wqs/303d/303d.html>)

Section IV: Area and Population Within the MS4

Yes

No

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Is the MS4 within an "Urbanized Area" as defined by U.S. EPA? (See <http://www.epa.gov/nepdes/pubs/fact2-2.pdf>)

If no, skip the rest of this section and continue to Section V. If yes, estimate the area served by and the population within the MS4 in an Urbanized Area (UA).

(Urbanized Area maps are available on the EPA web site at: <http://cfpub1.epa.gov/nepdes/stormwater/urbanmaps.cfm>)

Total municipal area (in square miles):

9.6 sq. miles

Total municipal population (in year 2000):

3234

MS4 service area within Urbanized Area (in square miles):

2.06

Municipal population within Urbanized Area (in year 2000):

1087

Section V: Potential Permit Exemption

Yes

No

Section NR 216.023, Wis. Adm. Code, allows certain MS4s that have less than 1000 people residing in an urbanized area to be waived from having to obtain municipal storm water permit coverage.

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Do you believe that the MS4 may be eligible for this potential exemption?

Section VI: Summary of Municipal Storm Water Program Activities

Describe the programs or activities the municipality is doing or will do to comply with the requirements of the MS4 general permit. Attach additional pages if necessary.

A. Public Education and Outreach

Describe the public education and outreach program activities that the municipality will implement to comply with section 2.1 of the MS4 general permit.

MAILING TO ALL TOWN RESIDENTS - STORMWATER ARTICLE
SPECIFIC TO OUR TOWN

B. Public Involvement and Participation

Describe the public involvement and participation program activities that the municipality will promote to comply with section 2.2 of the MS4 general permit.

STORMWATER PERMIT WILL BE A~~R~~ POSTED
AGENDA ITEM AT THE TOWN OF USHKOSH ANNUAL MEETINGS
AND OTHER MEETINGS AS NECESSARY

C. Illicit Discharge Detection & Elimination

Describe the illicit discharge detection and elimination program authority and activities that the municipality will develop and implement to comply with section 2.3 of the MS4 general permit.

TOWN HAS MOSTLY RESIDENTIAL
DEVELOPMENT WITH ABOVE GROUND DISCHARGE. HOWEVER, WE WILL CONDUCT A
ONE-TIME INSPECTION OF OUTFALLS DURING DRY PERIOD TO SEARCH FOR ANY
ILLICIT DISCHARGE. TOWN HAS AN ADOPTED NUISANCE ORDINANCE.

D. Construction Site Pollution Control

Describe the construction site pollutant control program authority and activities that the municipality will develop and implement to comply with section 2.4 of the MS4 general permit.

~~TOWN HAS AN ADOPTED
NUISANCE ORDINANCE IN EFFECT TO HANDLE ANY PROBLEMS~~
TOWN HAD WINNEBAGO COUNTY DRAFT DNR TO MODEL ORDINANCE, COUNTY ALSO
ASSUMES PLAN REVIEW, INSPECTION, + ENFORCEMENT

E. Post-Construction Site Storm Water Management

Describe the post-construction storm water management program authority and activities that the municipality will develop and implement to comply with section 2.5 of the MS4 general permit.

TOWN HAD WINNEBAGO COUNTY DRAFT ORDINANCE + ASSUME
REVIEW, INSPECTION, + ENFORCEMENT

F. Pollution Prevention

Describe the pollution prevention program activities that the municipality will implement to comply with section 2.6 of the MS4 general permit.

- TOWN HAS NO GARAGE + EQUIPMENT - WORK IS CONTRACTED OUT
- TOWN DOES NOT PICKUP LEAVES OR FERTILIZE TOWN GROUNDS

Section VII: Certification

I hereby certify that I am an authorized representative of the municipality that is the subject of this application for general permit coverage, and that the information provided is true and complete, to the best of my knowledge. I understand that Wisconsin law provides severe penalties for submitting false information.

Authorized Representative Name

JIM ERDMAN

Title

TOWN SUPERVISOR

Signature

Jim Erdman

Date Signed

MAY 30, 2006

E-mail address

townofushkosh@new.rr.com

Telephone Number (include area code)

920-233-3618

Fax Number (include area code)

920-231-3435

Return this completed form to:

Wisconsin Department of Natural Resources
Storm Water Program - WT/2
PO Box 7921
Madison, WI 53707-7921